|  | PATENT  | ,   | Application or Docket Number  O101919 |  |                     |                          |           |                   |                   |                     |        |                               |                        |  |
|--|---|---|---------------------------------------|--|---------------------|--------------------------|-----------|-------------------|-------------------|---------------------|--------|-------------------------------|------------------------|--|
| Effective October 1, 2000 910 /1919  |   |   |                                       |  |                     |                          |           |                   |                   |                     |        |                               |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                                       |  |                     |                          |           |                   | SMALL ENTITY TYPE |                     |        | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| TC   | TAL CLAIMS  | •   | 28                                    |  |                     |                          |           | RATE              |                   | FEE                 | ]      | RATE                          | FEE                    |  |
| FC   | R .   |   | NUMBER FILED                          |  | NUMBER EXTRA        |                          |           | BASIC F           | EE 3              | 55.00               | OR     | BASIC FEE                     | 710.00                 |  |
| τc   | TAL CHARGE  | BLE CLAIMS                                | 28 minus 20=                          |  | . 8                 |                          |           | X\$ 9=            |                   |                     | OR     | X\$18=                        | 144                    |  |
| INE  | EPENDENT C  | LAIMS                                     | 3 minus 3 =                           |  |                     |                          |           | X40=              |                   |                     | OR     | X80=                          |                        |  |
| MU   | LTIPLE DEPE   | NDENT CLAIM P                             | RESENT                                |  |                     |                          |           | +135=             |                   |                     | OR     | +270=                         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |                                       |  |                     |                          |           | TOTAL             | _                 | <del></del>         | OR     | TOTAL                         | 924                    |  |
| CLAIMS AS AMENDED - PART II  |   |   |                                       |  |                     |                          |           |                   | <u> </u>          |                     | ,      | OTHER                         | THAN                   |  |
| <u> </u>   | (Column 1) (Column 2) (Column   |   |                                       |  |                     |                          | L -       | SMAL              | LEN               | ПΥ                  | OR     | SMALL                         |                        |  |
| AMENDMENT A  | 1/3/105   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID              | BER                 | PRESENT<br>EXTRA         |           | RATE              | TI                | DDI-<br>ONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| ğ  | Total   | .23                                       | Minus                                 | - 2  | 8                   | -/0                      |           | X\$ 9-            |                   |                     | OR     | X\$18=                        | <u>^</u>               |  |
| AMI  | Independent<br>FIRST PRESE  | NTATION OF M                              | Minus (                               |  | CIAIM               |                          |           | X40=              |                   |                     | ОЯ     | X80=                          |                        |  |
| -  |   | '   | +135=                                 |  |                     | OR                       | +270=     |                   |                   |                     |        |                               |                        |  |
| 7 PB   |   |   |                                       |  |                     |                          | 7         | TOT/<br>ADDIT. FE |                   |                     | OR     | TÖTAL<br>ADDIT. FEE           |                        |  |
| -4   | (Column 1) (Column 2) (Column 3)  |   |                                       |  |                     |                          |           |                   |                   |                     |        | •                             |                        |  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVIO<br>PAID                      | BER<br>OUSLY        | PRESENT<br>EXTRA         |           | RATE              | TK                | DDI-<br>ONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | . 23                                      | Minus                                 | . 2  | 8                   | 8                        |           | X\$ 9=            |                   |                     | OR     | X\$18=                        |                        |  |
|  | Independent   | • 2                                       | Minus                                 | en S                                       | <u> </u>            | -                        |           | X40=              | T                 |                     | OR     | X80=                          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |  |                     |                          |           | +135=             | T                 |                     | OR     | +270=                         | Ÿ                      |  |
|  |   |   |                                       |  |                     |                          |           |                   | Į.                |                     | OR     | TOTAL<br>ADOIT, FEE           | /                      |  |
|  |   | •   | VOOIT. FE                             | ~  |                     | •                        | nuui. PEE |                   |                   |                     |        |                               |                        |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | :                                     | (Colum<br>HIGH<br>NUME<br>PREVIO<br>PAID I | EST<br>BER<br>OUSLY | (Column 3) PRESENT EXTRA |           | RATE              | TIC               | DDI-<br>DNAL<br>EE  |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | •   | Minus                                 | ••   |                     | 8                        |           | X\$ 9=            | 丅                 |                     | OR     | X\$18=                        | FEE                    |  |
|  | Independent   | •   | Minus                                 | 100  |                     | <b>3</b>                 |           | X40=              | 十                 |                     |        | X80=                          |                        |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |  |                     |                          |           | +135=             | ╂                 |                     | OR     | <b>~</b> 0√=                  |                        |  |
| . 11   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                       |  |                     |                          |           |                   |                   |                     | OR     | +270=                         |                        |  |
| "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Peid For" IN THIS SPACE is less than 3, enter "20."  The "Highest Number Previously Peid For" (Total or Independent) is the highest number tound in the appropriate box in column 1. |   |   |                                       |  |                     |                          |           |                   |                   |                     |        |                               |                        |  |
| 1  | ne Highest Num  | ber Previously Pai                        | i For (Total or                       | Independe                                  | int) is the         | highest rumbe            | r four    | e enti ni br      | ppropr            | iate box            | tn cot | <i>u</i> nn 1.                |                        |  |